

Illinois Association of
Extended Care, Inc.

www.iaec-inc.org



**NCRS (NATIONAL CERTIFIED RECOVERY SPECIALIST TRAINING)
TRAINING AND CERTIFICATION REQUIREMENTS**

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Introduction

Extended Care Facilities employ individuals who fill a unique role among health and human service professionals.

Such practitioners work in a unique setting and utilize numerous approaches. They recognize the need to assure quality care to residents.

This voluntary credentialing system has been designed for extended care professionals who provide services to adults and drug involved individuals.

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Introduction

The demonstrated link between extended care and recovery has resulted in the development of this credentialing process.


Individuals seeking this certification must be knowledgeable of both the recovery and substance abuse treatment systems.

Certification provides a professional credential that can guide employers in selecting competent staff and sets the direction for further professional growth.

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Range of Disciplines

- Criminal justice
- Addictions
- Social work
- Health
- Psychology
- Human services



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About Certification

The Extended Care Professional certification is designed to assess and individual's ability to provide support and direction to alcohol/drug involved individuals.

It defines an extended care professional's role and function, thus distinguishing these individuals among other health and human service providers.

The certification process is designed to accommodate and evaluate those who are both experientially trained, as well as those who are academically trained.




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About Certification

The NCRS credential provides affirmation, encouragement and peer recognition of staff (employees and volunteers) that work in Halfway Houses, Recovery Homes, Sober Rooming Houses, Neighborhood Recovery Centers and other Social Model Programs and Centers.

The overlap of roles and responsibilities in this continuum of care has resulted in greater communication and interdependence among treatment and recovery specialist professionals.

The development of a national certification for a recovery professional is designed to strengthen the supervision and rehabilitative potential provided by our continuum of care.



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Definition and Setting

This certification process was developed for professionals working with alcohol and other drug abuse (AODA) extended care populations.

The **setting in which the required number of work and supervised hours must be met as defined as:** Any setting which provides case management services, service coordination, behavior management and behavior shaping to alcohol/drug involved individuals.

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IAEC Philosophy Statement

In Illinois, the NCRS credential fosters continuing professional development and recognizes unique skills required in programs that promote individual, family and community recovery.

National Certified Recovery Specialist share and upgrade skills by means of specialized education and training and peer oriented experiential learning.

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Rationale

The Illinois Association of Extended Care, Inc. endorses the concept that the support and coaching provided in an extended care setting is a specialty requiring performance by competent and professional individuals.

The standard for recognition of these individuals is based on the side of proven experience in long term recovery, recovery support systems and sober living skills.

Experiential training and education pertaining to long-term recovery are essential at this level of care.

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Recovery Specialist

Minimum Requirements

1. Direct Services/Work Experiences
2. 1000 hours of work or 2000 hours of volunteer experiences
 - a. (1500 hours shall have been in direct recovery support systems services)
3. Hours of Direct Supervision (75 hours)
4. Hours of Education (60 hours)
5. Initial Exam required? YES-NCRS

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Education

Ethics
Dynamics of Addiction
Legal and Professional Responsibility
Crisis Intervention
Self-help & Recovery
Case Management, Monitoring
Counseling

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Suggested Educational Resources

Social Model of Recovery	Illinois Licensure Rule 2060
Slaying the Dragon	ASAM Patient Placement Criteria II
Loosening The Grip	A.A. World Services Approved Literature
Critical Incidents	
IAEC Program Standards/ Body of Knowledge/Administration and Programming	

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Group A:20

A-1 Screening: The process by which a resident is determined appropriate and eligible for admission to a particular program.

A-2 Resident Intake: The process of collecting resident information at the beginning of residential extended care stay that is used in assessment of a resident for residential extended care stay.

A-3: Resident Orientation: Individual or group sessions to familiarize clients with program services, expectations and goals.

A-4 Residential Assessment: The process by which a specialist evaluates the intake information collected in order to determine the appropriate services. This includes knowledgeable and application of the ASAM PPC2 and recovery support systems.

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Group B-20

B-1 Recovery Planning: Defining areas of problems and needs, establishing long and short-term goals, and developing appropriate strategies for reaching these goals.

B-2 Case Management: Activities which bring services, agencies, resources or people together within a planned framework of action toward the achievement of established goals. It may involve liaison activities and collateral contact.

B-3: Crisis Interventions: Those services which respond to an alcohol and/or drug abusers' needs during acute emotional and /or physical distress.

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Group B-20

B-4 Resident Education: Seminars or workshops which have the major goal of increasing the residents knowledge and recognition of significant symptoms and patterns of problematic behavior.

B-5 Referral: Identifying the needs of the resident that cannot be met by the specialist or the agency and assisting the resident to utilize the support systems and community resources that are available.

B-6 Intervention: The formalized process of attempting to interrupt the progression of alcohol and/or drug abuse/dependency as indicated by high-risk behaviors.

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Group C -10

C-1 Record Keeping: Recording the results of the assessment and recovery plan, writing reports, continued stay reviews, discharge summaries and other resident related data. This includes written communication-letters and other professionals regarding a resident's needs and recovery planning.

C-2 Consultation: Relating with counselors and other professionals in regard to resident recovery services to assure comprehensive, quality care for the resident.

C-3 Outreach: Direct contact by a specialist with persons in a community setting to identify and/or assist persons with substance abuse related problems.

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Group D (Required for Recovery Home Operators Only)

D-1 Clinical Supervision: The process of assuring that each recovery specialist is provided monitoring and feed back to assure that quality recovery support services are being delivered.

Realizing that supervision may take place in a variety of settings and have many faces, IAEC determined not to place limiting criteria on areas of supervision or qualifications of a supervisor. Rather, it was determined that supervision should be as broadly defined as in the Center for Substance Abuse Treatment/Substance Abuse and Mental Health Services Administration's **Technical Assistance Publication Number 21. TAP 21** defines supervision/clinical supervision as: *the administrative, clinical and evaluative process of monitoring, assessing and enhancing counselor performance.*

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Letters of References

Applicant must supply three(3) Substance Abuse Professional Staff as defined in Section 2060.309

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